

FORMS FOR BID

FOR CONSTRUCTION ON STATE HIGHWAY IN SAN BERNARDINO COUNTY IN HIGHLAND FROM 0.3 MILE NORTH OF ROUTE 210 TO ROUTE 18

In District 08 On Route 330

Under

Notice to Bidders and Special Provisions dated January 4, 2016

Standard Specifications dated 2010

Project plans approved December 7, 2015

Standard Plans dated 2010

To be submitted conjointly with
Electronic *Bid* book dated January 4, 2016
Identified by
Contract No. 08-1F4604
08-SBd-330-R29.0/44.1
Project ID 0814000228

Federal-Aid Project ACNHP-P330(009)E

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

DBE - COMMITMENT

DES-OE-0102.10D (REV 12/2014)

ADA Notice

CONTRACT NO:						
BID AMOUNT:						
BID OPENING DATE:						
BIDDER'S NAME:						
DBE GOAL FROM CONTR	ACT %:					
DBE PRIME CONTRACTO	R CERTIFICATION ¹ :	TOTAL NUMBER OF A	LL SUBCONTRACTS (DBE &	NON-DBE)	TOTAL VALUE OF ALL SUBCONTRA	CTS (DBE & NON-DBE)
BID ITEM NO.	SERVICES TO BE S	ND DESCRIPTION OF SUBCONTRACTED OR D BE PROVIDED ²	WORK CATEGORY CODES ³	opened.	NAME OF DBEs st be certified on the date bids are include Caltrans' certification no., DBE s, and phone number. Show 2nd and lower tier subcontractors)	AMOUNT (\$)
Show all DBE firms being each DBE shown stating shown for the specific an	that it will be participat		written confirmation from erform the specific work		Total Claimed Participation	\$
The names of the 1st tier			be consistent with the		·	%
Subcontractor List (Pub Cont Code § 4100 et seq.). 1Each DBE prime contractor must enter its certification number and show all work to be performed by DBEs, including work performed by its own forces.					er acknowledges that it is comm own on this form to meet the cor	itted to use the
² If 100% of an item is not the item to be performed		nished by the DBE, de	scribe the exact portion of			
³ Use Work Category Codes from the California Unified Certification Program database.					gnature of Bidder	
				Da	te (A	rea Code) Tel. No.
				Pe	rson to Contact (Ple	ease Type or Print)

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DBE CONFIRMATION

DES-OE-0102.13 (NEW 05/2015)

Contract no.:			
Name of DBE business:			
Name of DBE representative	.		
DBE certification number:			
Name of bidder:			
Name of prime contractor if	different from the bidder:		
Name of representative of bi	idder or prime contractor:		
Date:			
Bid item number	Item of work and description of services to be subcontract	cted or materials to be provided ¹	Amount (\$)
¹ If 100% of an item is not to portion of the item to be pe	be performed or furnished by the DBE, describe the exact rformed or furnished.	Total	
		enterprise, I confirm that my busin prime contractor shown above reg the bidder is awarded the contract contractual agreement with the bid	f a certified disadvantaged business ess was contacted by the bidder or larding the contract shown above. If , my business will enter into a dder or prime contractor to perform k shown on the DBE Commitment
		I certify under penalty of perjury th	at the foregoing is true and correct.
		Signature of DBE's authorized	representative:
		Printed name of DBE's author	ized representative:
		Title of DBE's authorized repre	esentative:
		Date:	_

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DES-OE-0102.11A (REV 12/2014)

Bidder's Name:	
Contract No.: _	

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List items of work the Bidder made available to DBE firms. Identify items of work the Bidder might otherwise perform with its own forces, items that have been broken down into economically feasible units to facilitate DBE participation, and items for which the Bidder has established flexible time frames for performance and delivery schedules in a manner that encourages and facilitates DBE participation. For each item listed, show the dollar value and percentage of the total contract. The Bidder must demonstrate that sufficient work to meet the goal was made available to DBE firms.

ltem of Work Offered, Services Offered, or Materials Supplied	Perfor	Normally ms Item s/No	Facilitate	en Down to Participation es/No	for Performan Sch	xible Timeframes ce and Delivery edules s/No	Amount (\$)	Percentage of Total Bid
	YES	NO	YES	NO	YES	NO		
	YES	□ NO	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	Пио	YES	□ NO	YES	□NO		
	YES	Пио	YES	□ NO	YES	□NO		
	YES	Пио	YES	□ NO	YES	□ NO		
	YES	Пио	YES	□ NO	YES	□ NO		
	YES	NO	YES	□ NO	YES	□ NO		
	YES	Пио	YES	□ NO	YES	□ NO		
	YES	□ NO	YES	□ NO	YES	□ NO		
	YES	Пио	YES	□ NO	YES	□ NO		
	YES	Пио	YES	□ NO	YES	□NO		
	YES	NO	YES	□ NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	NO	YES	□ NO	YES	□ NO		
	YES	Пио	YES	□ NO	YES	□ NO		
	YES	NO	YES	□ NO	YES	□ NO		
	YES	NO	YES	□ NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ NO		

STATE OF CALIFOR	NIA • DEPARTMENT O	F TRANSPORTATION
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DBE GOOD FAITH EFFORTS DOCUMENTATION

Bidder's Name	4
Contract No.:	
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					nclude the items of work offered a copies of solicitations. e-mail me		
Name of DB	E Solicited	Date of In	itial Solicitation	ltems o	f Wark Offered	Follow Up Me	thods and Dates
	vided quotes, the	price quote for e	ach firm, and the price	difference for each DBI	specific to the items of work being E if the selected firm is not a DBE act.		
Items of Work	Specifications	ed Plans/ for Work Offered s/No	Name of Selected Firm	DBE or Non-DBE	Name of Rejected Firm	Quote (\$)	Price Difference (\$)
	YES	□ NO					
	YES	ОИ					
	YES	ОИ					
	YES	ОИ					
	YES	Пио					
	YES	Пио					
	YES	□ NO					
	YES	□ NO					
	YES	□ NO					
If the firm relected for th	- it it - D	DCiala tha sa			nd attach names addresses and	phone numbers for the	·

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

Bidder's Name	(,
Contract No.:	

DBE GOOD FAITH EFFORTS DOCUMENTATION	
DES OF 0102 11A (PEV 12/014)	

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4. Describe the Bidder's outreach efforts to identify and solicit the interest of all certified DBEs that have the capability to perform the work of the Contract. Provide copies of supporting documents.								
Description of Outreach	Dates	Location (if applicable)	Results					
	de interested DBEs with adequate information a assisted, the type of information provided, and							
Describe the Bidder's efforts made to assist dates. Provide copies of supporting document	t interested DBEs in obtaining bonding, lines of ts.	credit, or insurance. Identify the DBEs assisted	d, the type of assistance offered, and the					
equipment the DBE purchases or leases from documents. List efforts made to assist interest	t interested DBEs in obtaining necessary equip the prime contractor or its affiliate. Identify the ted DBEs in obtaining bonding, lines of credit, i abcontractor purchases or leases from the prim	DBEs assisted, the type of assistance offered, nsurance, necessary equipment, supplies, mat	and the dates. Provide copies of supporting erials, or related assistance or services,					
8. List the names of agencies and the dates on which they were contacted to provide assistance in contacting, recruiting, and using DBE firms. If the agencies were contacted in writing, provide copies of supporting documents.								
9. Include additional data to support a demonstrate of the support and the sup	stration of good faith efforts							
s. meiade additional data to support a demon-	an anen or good lakir enerts.							
NOTE: USE ADDITIONAL SHEETS OF PAPE	ER IF NECESSARY.							

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